SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBE (check only one)

F	FOR LINE NUMBER:							34	OF	•	107
(check only one)											
	X	11a		11b		11c		12			
		13		14		15		16			17

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) The Travelers Companies, Inc. Political Action Committee (T-PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Rowe, Philip, D, Date of Receipt Mailing Address Suite 130 11070 White Rock Road 2016 Zip Code State Transaction ID: A2016-1939843 CA Rancho Cordova 95670 Amount of Each Receipt this Period FEC ID number of contributing 14.62 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Field Director RC Travelers Indemnity Co Receipt For: Aggregate Year-to-Date ▼ Primary General 303.39 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Rowland, David, D., Date of Receipt Mailing Address 385 Washington Street 10 2016 City State Zip Code Transaction ID: A2016-1939772 MN St. Paul 55102 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Travelers Indemnity Co **EVP Fixed Income Investments** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1900.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Russell, Douglas, K, Date of Receipt Mailing Address One Tower Square 14 2016 City State Zip Code Transaction ID: A2016-1939755 CT Hartford 06183 Amount of Each Receipt this Period FEC ID number of contributing C 144.23 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Travelers Indemnity Co **SVP Corporate Controller** Receipt For: Aggregate Year-to-Date ▼ Primary General 3028.83 Other (specify) 258.85 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....